IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

IMPROVEMENT PERMIT / CERTIFICATE OF COMPLETION / OPERATION PERMIT / EXISTING SYSTEM INSPECTION

PROPERTY DESCRIPTION NO. 22776 DATE 12-15-95 TAX MAP NO. 11L-2-A-60 Watershed: ☐ Yes ☑ No

OWNER OR CONTRACTOR Karen Buttke PHONE: Business _____ Home 878 6989

ADDRESS 143 Southway Lane

LOCATION 64E TL Swann Rd at end TR Riverhill ~~Dr~~ TR Southway 6th on rt TL

SUBDIVISION Coolwood BLOCK / SECTION _____ LOT 60 LOT AREA Harnett SITE CLASS PS DESIGN FLOW 360 L.T.A.R. 1.3

Septic Tank: 1000 Gallons; STB 1012 Date 7-6-99
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400
No Lines 4 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

☐ New System ☐ Repair System Type: I ~~II~~ III, IV, V, VI
System Description: Conv. Gravity
Repair System Description: " "
Maintenance Agreement Required: ☐ Yes ☑ No

☐ House/Mod. Home ☑ Mobile Home ☐ Business ☐ Other
No. Bedrooms 3 No. Bathrooms 2 No. Employees ____

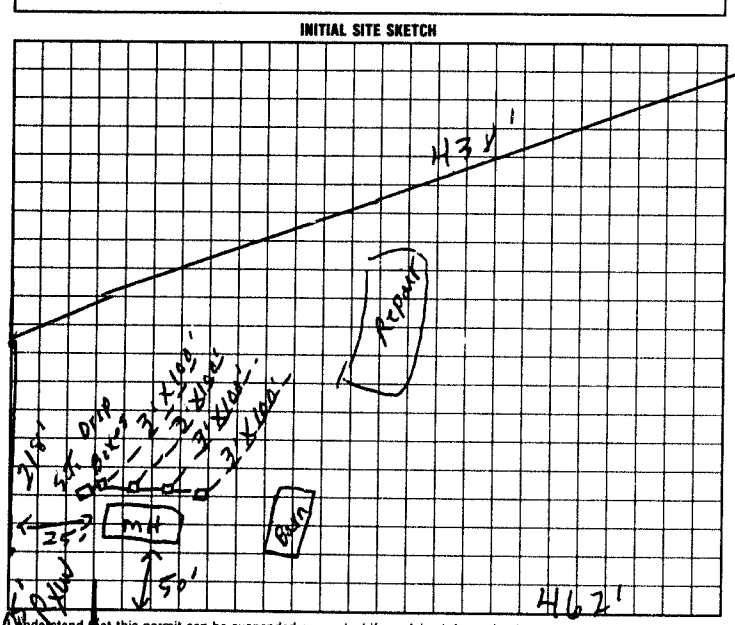
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☐ Community ☑ Public

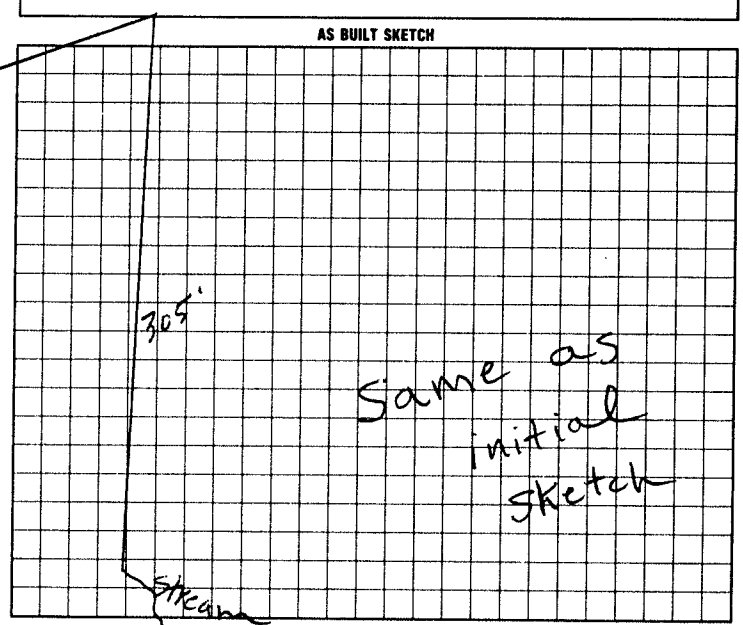
Comments:

Comments:

INITIAL SITE SKETCH



AS BUILT SKETCH



I understand that this permit can be suspended or revoked if any false information is supplied toward securing the permit/any unauthorized changes are made to the site/any unauthorized changes are made in the installation of the system.

Signed: Karen Buttke

Improvement Permit by: P. C. Moore date 12-15-95

~~Existing System Inspection~~ Authorization by: P. C. Moore date 12-15-95

Authorization to const.

Installed by: A-1 backhoe

Certificate of Completion by: _____ date _____

Operation Permit by: P. C. Moore date 9-8-99

HEALTH DEPT. COPY: WHITE INSPECTION COPY (FINAL): GREEN OWNER COPY (FINAL): YELLOW INSPECTION COPY (INITIAL): PINK OWNER COPY (INITIAL): GOLD

Authorization to Const. Expires 6 mos. from issue date